

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 15 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **H73013** (5)

1. Corporation Name  
**SUNCOAST TRANSPORTATION BROKERS, INC.**

Principal Place of Business <b>% NATHAN B. SIMPSON</b> <b>111 E. MADISON STREET</b> <b>TAMPA FL 33602</b>	Mailing Address <b>P.O. BOX 97</b> <b>DADE CITY FL 33526-0097</b> <b>US</b>
--	--



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/22/1985</b>	3a. Date of Last Report <b>04/29/1996</b>
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <b>59-2581142</b>		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>SIMPSON, NATHAN B.</b> <b>111 E. MADISON ST.</b> <b>TAMPA FL 33602</b>		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO <input checked="" type="checkbox"/> DELETE	1.1 TITLE	See Attached for Additions/Changes
NAME	RANKIN, TOM L.	1.2 NAME	
STREET ADDRESS	111 E. MADISON ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	
TITLE	EVP <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	GUNTER, DAN	2.2 NAME	
STREET ADDRESS	111 E. MADISON STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	VPGM <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIMMER, RICHARD E	3.2 NAME	
STREET ADDRESS	111 E. MADISON STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	
TITLE	VCFO <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAILEY, B. T.	4.2 NAME	
STREET ADDRESS	111 E. MADISON ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHINDLER, D.R.	5.2 NAME	
STREET ADDRESS	111 E. MADISON STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEAR, STEVEN D	6.2 NAME	
STREET ADDRESS	111 E. MADISON STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *D. Schindler* *D.R. Schindler* Date **8/13/2003** Daytime Phone # **339-3981**

CR2E034 (9/96)

**SUNCOAST TRANSPORTATION BROKERS, INC.**

P.O. Box 97  
Dade City, FL 33526

Federal Identification No.  
59-2581142

Document No. H73013

Date of Incorporation  
August 22, 1985

Incorporated State of Florida

TITLE	NAME	STREET ADDRESS	CITY/STATE/ZIP
Chairman of the Board	John A. Brabson, Jr.	111 E. Madison Street	Tampa, FL 33602
President and Chief Executive Officer	M. Lenny Pippin	111 E. Madison Street	Tampa, FL 33602
Treasurer	Kimberly Johnson	111 E. Madison Street	Tampa, FL 33602
Secretary	D. R. Schindler	111 E. Madison Street	Tampa, FL 33602
<b>Directors</b>	John A. Brabson, Jr.	111 E. Madison Street	Tampa, FL 33602
	Michael L. Carrere	111 E. Madison Street	Tampa, FL 33602
	J. T. Lykes, III	111 E. Madison Street	Tampa, FL 33602
	M. Lenny Pippin	111 E. Madison Street	Tampa, FL 33602